PTO/SB/82 (01-06) Approved for use through 12/31/2008 OMB of

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Application Number	10/615,706 / PP 14,943	
Filing Date	07/08/2003 / 06/22/2004	
First Named Inventor	Austin	
Art Unit		
Examiner Name	Annette H. Para	
Attorney Docket Number		

I hereby revoke all previous powers of attorney given in the above-identified application.			
A Power of Attorney is submitted herewith.			
OR	1		
hereby appoint the practitioners associated with	the Customer Number:	71897	
Please change the correspondence address for the The address associated with Customer Number: OR	above-identified applica	tion to:	
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	Email		
l am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CI Statement under 37 CFR 3-73(b) is enclosed. (Form	FR 3.71.		
SIGNATURE of Applicant			
Orginature / \/\W\U\/\	or riborginee of Record	<u> </u>	
Name AAVIN J. C. AUSIN			
1/0/06/03	Telephone +441	902 376 372	
OTE: Signatures of all the inventors or assignees of record of the entire interest or ignature is required, see below".	their representative(s) are required	Submit multiple forms if more than one	

Total of ______omme are submitted.

This collection of information is required by 33 CFR1 38. The information is required to obtain or retain a benefit by the public which is to till can't by the USEPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and O'CPR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, concluding gilbering, preparing, and unbinning the completed application. Corn of the amount of the your requires to complete this form another suppressions for reducing the time will very depending upon the individual case. Another the control of the control